C mbir	n d Declarati	n For Patent Application and Pow	r of Att	rn y	(Continued)
		International Applications)		•	

ATTORNEY'S DOCKET NUMBER 12318-12

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35. United States Code, §112, I acknowlege the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBE	P	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
08/117,418	07	September 1993			Х
08/378,946		January 1985		Х	29
PCT A	BBLICATIONS DESIGNATING	TUELLE			
PCT APPLICATIONS DESIGNATING T PCT APPLICATION NO PCT FILING DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)			
					

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number!

Charles W. Calkins



John M. Harrington Send Correspondence to:

Direct Telephone Calls to: Charles W. Calkins Petree Stockton L.L Charles W. Calkins 1001 West Fourth Stree 910 607 7315 Winston 27101 SECOND GIVEN NAME FULL NAME OF INVENTOR Nusser Dennis OUNTRY OF CITIZENSHIP RESIDENCE & Lauderdale Florida US 33301 POST OFFICE ADDRESS Victoria Terrace Ft. Lauderdale IRST SIVEN NAME SECONO GIVEN NAME FULL NAME OF INVENTOR . TATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS AMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF INVENTOR STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SENATURE OF INVENTOR 201 N-Mills M. Mun	SIGNA TURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
Z MARCH 1996	DATE	DATE



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ATTORNEY'S	OOCKET	NUMBER

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

12318-12

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INPUT APPARATUS FOR PEOPLE HAVING SMALL HANDS

the specification of which (check only one item below):

- is attached hereto.
- was filed as United States application

Serial No. ___

and was amended

on .

(if applicable).

_____ (if applicable).

was filed as PCT international application

PCT/US 94/09827 Number

31 AUGUST 1994

and was amended under PCT Article 19

07 JULY 1995

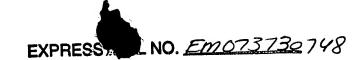
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowlege the duty to disclose information which is material to the examination of this application in accordance with Title 37. Code of Federal Regulations. §1.56(a).

I hereby claim foreign priority benefits under Title 35. United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	OATE OF FILING	PRIORITY CLAIMED UNDER 35 USC 119
US .	94/09827	31 AUGUST 1994	y⊟rYES □ NO
			□ v€S □ %O
			□ YES □ 40



PATENT

	Attorney's Docket No.	012318–12	
Applicant or Patentee:	W. Nusser		<u>—</u>
Serial or Patent N .: 08 / 117,418			
Filed or Issued: September	1993		
For: INPUT APPARATUS FOR PEG	PLE HAVING SMALL	HANDS	
VERIFIED STATEMENT (DE STATUS (37 CFR 1.9(f) and			
As a below named inventor, I hereby defined in 37 CFR 1.9(c) for purpose	declare that I qualify to	as an independent inventor	as (b)
of Title 35 United States Code, to th	e Patent and Tradema	rk Office with recard to the	in-
vention entitled INPUT APPARAT	JS FOR PEOPLE HAV	ING SMALL HANDS	
described in			
the specification filed here	with. (Filing Under	35 U.S.C. 371 of PC	r/us94/09827)
application serial no. 0 /		, filed	
patent no.	, issued		
I have not assigned, granted, convey			
cern under 37 CFR 1.9(d) or a nonpro- Each person, concern or organization censed or am under an obligation un- any rights in the invention is listed be	n to which I have assi der contract or law to a low:	igned, granted, conveyed, o	rli- nse
no such person, concern,			
persons, concerns or orga			; naina
*NOTE: Separate verified statements are rights to the invention everring to	required from each names ; their status as small entities.	(37 CFR 1.27).	
FULL NAME			
ADDRESS			
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FULL NAME			
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FULL NAME			
ADDRESS		1	
INDIVIOUAL SMALL B	USINESS CONCERN	NONPROFIT ORGANIZATI	ON
I acknowledge the duty to file, in this		notification of any change in	sta-
tus resulting in loss of entitlement to	small entity status price	or to paying, or at the time of	pay-